\ln re application of: Rina Aharoni et al.

August 22, 2003

Serial No. :

Filed: For:

09/768.872 ~

January 23, 2001

TREATMENT OF AUTOIMMUNE CONDITIONS WITH COPOLYNES 1 AND COPOLYMERS

No additional fee is required, other than the enclosed \$110.00 for the

PEE

COMMISSIONER FOR PATENTS P.O. BOX 1450 ALEXANDRIA, VA 22313-1450

SIR:

Transmitted herevith is an amendment to the above-identified application.

Small entity status of this application under 37 C.F.R. § 1.9 and § 1.27 has been established by a verified statement previously submitted.

a verified statement to establish small entity status under 37 C.F.R. § 1.9 and § 1.27 is enclosed.

one-month extension of time. filing fee is calculated as follows:

1	NUMBER	Г	HIGHEST		NUMBER OF EXTRA CLAIMS PRESENTED	Г	RATE		PEE		
	AFTER AMEND- MENT		NUMBER PREVIOUSLY PAID FOR				SMALL ENTITY	OTHER ENTITY		SMALL ENTITY	OTBER ENTITY
Total Claims	21	-	* 46	-	*** 0	×	9.00	18.00			0
Indepen- dent Claims	2	-	** 7	-	*** 0	х	42.00	84.00	-		o
Multiple Dependent Claims(s) Presented Yes X No For First Time:							140.00	280.00			O
						TOTAL ADDITIONAL .				0	

^{*}If the "Highest NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

^{**}If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than

^{3,} write "3" in this space.
**If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0" in the space.